

Friday Ship Oct. 17

Work Order ID 125557

125557

Page 1

Item ID: D3876-11

Accept

N900040100

Setup Start *NS1*

Revision ID:

Item Name: Protector - Floor

Stop *NS2*

Start Date: 10/10/14 Start Qty: 1.00

1 (2)
1

Cust Item ID:

Required Date: 10/17/14 Req'd Qty: 1.00

Customer:

Reference:

Approvals:

Process Plan: MA

Date: 14.10.10

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D3876	A

100

0.00

100

FLOW WATER JET

Waterjet

Memo

0.00

FLOW CNC Waterjet

1-Cut as per Dwg D3876

Dwg Rev: A

Prog Rev: A

2- Deburr if necessary

(2) DC 14/10/14

110

QC2- Inspect parts off machine FAI/FAIB

0.00

110

QC

Memo

0.00

Quality Control

(2) DC 14/10/14

120

QC8- Inspect parts - second check

0.00

120

QC

Memo

0.00

Quality Control

(2) DAS 38 9-89 14-10-16

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 125557

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125557

Page 2

Item ID: D3876-11

Accept

N900040100Setup Start ***NS1***

Revision ID:

Item Name: Protector - Floor

Stop ***NS2***Start Date: 10/10/14 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 10/17/14 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Identify as per dwg & Stock Location <i>pk</i>	0.00							
130						<i>2</i>			
Packaging	Memo	0.00							
Packaging									
140	QC21- Final Inspection - Work Order Release	0.00							
140									
QC	Memo	0.00							
Quality Control									

OCT 15 2014
DAS
06
9-89*MCS* *14-10-16**MF*
14-10-16

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

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Picklist Print

Friday, October 10, 2014 12:41:32 PM

Page 1

Work Order ID: 125557

125557

Parent Item: D3876-11

D3876-11

Parent Item Name: Protector - Floor

Start Date: 10/10/14

Required Date: 10/17/14

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A 09-01-14 new issue DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.125-F60029-04		Purchased	No			100	sf	6,029.016	11.18	14			

MI FXS 125-F60029-04

GE PLASTICS LEXAN SHEET

Dec 14/10/14

Location

Loc Qty

Loc Code

MAT019

4282.425

124866

106

m126425

160.925

m127934

665

m128746

790.5

m130209

2560

14

TPI

1746.59178

m129759

1746.59178

DQA: _____ Date: _____

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